#### **NORTHWEST DRIZZLE**

P.O. Box 77777 Puyallup, WA 98373

Mail To: Current Resident
PO Box 666
DEADWOOD, WA
98765

### **PROPERTY INFORMATION**

NA

Location: 3377 Happy Valley Rd DEADWOOD Tax ID: 12345678912

Use:

GENERAL SYSTEM TYPE: FAST to UV to pressure drainfiel

ON ID: 654321

Fold

# ON-SITE WASTEWATER TREATMENT SYSTEM INSPECTION REPORT

Inspected: 05/16/2008 - Inspection Type: INTERMITTENT - Correction Status: No corrections needed

Company: Work Performed By: Submitted 06/12/2008 by:

NORTHWEST DRIZZLE Burt Durp Cora Borax

### **COMMENTS & GENERAL INSPECTION NOTES**

No Deficiencies Noted

### **GENERAL SITE & SYSTEM CONDITIONS**

| The General Site and System Conditions were:                                         | Fully Inspected |
|--------------------------------------------------------------------------------------|-----------------|
| All Components accessible for maintenance, secure and in good condition:             | YES             |
| Surfacing effluent from any component (including mound seepage):                     | NO              |
| Components appear to be watertight - no visual leaks:                                | YES             |
| Improper encroachment (roads, buildings, etc.) onto component(s):                    | NO              |
| Component settling problems observed:                                                | NO              |
| Abnormal ponding present for one or more of the disposal components:                 | NO              |
| Subsurface components adequately covered                                             | YES             |
| Site maintenance required (e.g. Landscape maintenance) If yes, describe in comments: | NO              |

## **CONTROL PANEL INSPECTION DETAIL**

| Panel: Control 1 (Time Dosed)                                           |                 |
|-------------------------------------------------------------------------|-----------------|
| Manufacturer: Model: Serial#:                                           |                 |
| This component was:                                                     | Fully Inspected |
| Control Panel functioning as intended:                                  | Yes             |
| Control Panel Usage:                                                    | Standard        |
| Alarm functioning as intended:                                          | Yes             |
| Number of pumps that this panel controls:                               | 1               |
| Pumps operate independently (Daily flow averages are not accumulative): | True            |

# Pump 1 - Demand Dosed

| PUMP GPM: Tank 0      | Sal/Inch: | Inches Dropped: |          | Test | Time (hh/mm/ss): | 00/1/0  | Current GPM: |         | Last GPM: |
|-----------------------|-----------|-----------------|----------|------|------------------|---------|--------------|---------|-----------|
| Operational Settings: | CURRENT   | LAST            | OVERRIDE |      | Counters:        | CURRENT | LAST         | PERIOD  | GPD AVG   |
| Cycles Per Day:       |           |                 |          |      | Off Counter:     |         |              |         |           |
| Gallons Per Cycle:    |           |                 |          |      | Cycle Counter:   |         |              |         | 0.00      |
| ON Time (hh/mm/ss):   |           |                 |          |      | Flow Meter:      |         |              | 0.00    | 0.00      |
| OFF Time (hh/mm/ss):  |           |                 |          |      | ETM reading:     |         |              |         | 0.00      |
| Current Setting GPD:  | 0.00      |                 |          |      |                  |         | Days ir      | period: |           |

#### ONSITE SEWAGE SYSTEM INSPECTION DETAIL

| TANK: Trash Tank                                           |                 |  |
|------------------------------------------------------------|-----------------|--|
| This component was:                                        | Fully Inspected |  |
| Component appears to be functioning as intended:           | YES             |  |
| All required baffles in place (N/A = No baffles required): | YES             |  |

| Effluent level within operational limits (if NO explain in comments):                              | YES             |  |
|----------------------------------------------------------------------------------------------------|-----------------|--|
| Compartment 1 Scum accumulation (Inches, if other specify):                                        | 6               |  |
| Compartment 1 Sludge accumulation (Inches, if other specify):                                      | 8               |  |
| Pumping needed:                                                                                    | NO              |  |
| Approximate Gallons to be pumped (if needed) by Certified Pumper:                                  |                 |  |
| Aerobic Treatment Unit: ATU                                                                        |                 |  |
| Manufacturer: Bio-Microbics, Inc. Model: MicroFAST 0.5                                             |                 |  |
| This component was:                                                                                | Fully Inspected |  |
| Component appears to be functioning as intended:                                                   | YES             |  |
| Aerobic Mechanism appears to be functioning per manufacturers specifications:                      | YES             |  |
| ATU serviced per manufacturers requirements including cleaning of applicable filter(s):            | YES             |  |
| Trash Compartment solids accumulation within operational limits per manufacturer (n/a = no trash   | YES             |  |
| compartment):                                                                                      |                 |  |
| Aerobic Chamber solids accumulation within manufacturer operational limits (n/a = no aerobic       | YES             |  |
| chamber):                                                                                          |                 |  |
| Clarifying Chamber solids accumulation within manufacturer operational limits (n/a = no clarifying | YES             |  |
| chamber):                                                                                          |                 |  |
| Pumping needed:                                                                                    | NO              |  |
| Approximate Gallons to be pumped (if needed) by Certified Pumper:                                  |                 |  |
| TANK: Pump Tank                                                                                    |                 |  |
| This component was:                                                                                | Fully Inspected |  |
| Component appears to be functioning as intended:                                                   | YES             |  |
| Compartment 1 Scum accumulation (Inches, if other specify):                                        | 0               |  |
| Compartment 1 Sludge accumulation (Inches, if other specify):                                      | 1               |  |
| Pumping needed:                                                                                    | NO              |  |
| Approximate Gallons to be pumped (if needed) by Certified Pumper:                                  |                 |  |
| Pump: Effluent Pump                                                                                |                 |  |
| This component was:                                                                                | Fully Inspected |  |
| Component appears to be functioning as intended:                                                   | YES             |  |
| Controls functioning:                                                                              | YES             |  |
| Pump Vault Filter cleaned (N/A = not present):                                                     | N/A             |  |
| Disinfection: Ultra Violet                                                                         |                 |  |
| Manufacturer: The Disinfector Model: Disinfector                                                   |                 |  |
| This component was:                                                                                | Fully Inspected |  |
| Component appears to be functioning as intended:                                                   | YES             |  |
| Alarm mechanism functioning as intended:                                                           | YES             |  |
| UV bulb cleaned:                                                                                   | YES             |  |
| Drainfield: Pressure                                                                               |                 |  |
| This component was:                                                                                | Fully Inspected |  |
| Component appears to be functioning as intended:                                                   | YES             |  |
| Lateral lines flushed:                                                                             | NO              |  |
| Average squirt height (if performed) (feet, if other specify):                                     |                 |  |
| Ponding present? If YES explain in comments:                                                       | NO              |  |